REMARKS

Response to Claim Rejections Under 35 U.S.C. §103

Claims 46, 49-52, 75, and 136-139 were rejected by the Examiner under 35 U.S.C. §103(a) as being unpatentable over Hieshima et al. (U.S. Patent No. 6,063,111) in view of Ken et al. (U.S. Patent No. 5,749,891). Applicants have carefully reviewed the Examiner's comments in the above rejection and particularly the conclusion that the device of Hieshima is capable of being disposed about an aneurism. What basis has the Examiner used to reach this conclusion? Neither reference alone or together describes or teaches a containment member which has a leading length in a relaxed configuration when advanced out the port in the distal end of the guide member that has a transverse dimension which is more than that of the outside transverse dimension of the healthy portion of the patient's aorta adjacent to the aortic aneurysm and is adapted to be advanced about an exterior surface of the aortic aneurysm. As shown in Figs. 7-10 of the '111 patent, the distal end of the stent is pushed out of the microcatheter and then the catheter is withdrawn allowing the stent to expand within the blood vessel. There is nothing in the Hieshima et al. patent or the Ken et al. patent which would suggest a distal end of the containment member being advanced about an exterior surface of the aneurysm, particularly when the prior art devices are designed for deployment within the interior of a blood vessel not on the exterior of an aorta as in the present application.

The applicants amended claim 46 to add the language mentioned above in the last response, but the Examiner still refers to the prior language of "disposed" as compared with "advanced". There are significant different structural requirements for a

containment member to be disposed verses a containment member to be advanced about. Advancement requires column strength whereas disposed does not.

Applicants have added new claim 140 to further clarify the distal structure of the guide tube which guides the containment member so as to be advanced about the exterior of the aorta. The new claim calls for the guide member to have a double curvature in the distal portion thereof to guide the containment member about the exterior of the patient's aorta. This feature is not suggested in either Hieshima et al. or Ken et al. The guide tube of Ken et al. guides a coil perpendicular to the longitudinal axis of the guide tube which has a single curvature at its distal end. The single curve would fail to guide a containment member about the exterior of an aortic aneurysm.

Conclusion

Applicants believe that the pending claims define patentable subject matter. Further consideration pursuant to the concurrently filed RCE and an early allowance are earnestly solicited.

Respectfully submitted,

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